STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	MOTION AND AUTHORIZATION/DENIAL	CASE NO.
In the matter of (name(s), alias(es), DOB)		•
The names and addresses of paren	MOTION ts quardians or custodians are:	
Father	Address	
Mother	Address	
Guardian/Custodian	Address	
3. I request a transfer of this case for the following reasons:	e to the formal calendar review	rehearing adjournment
	umined by me and that its contents are true to	the best of my information, knowledge, and
belief.		
Signature	Date Agency/Address	
Name (type or print)	City, state, and zip	Telephone no
	AUTHORIZATION/DENIAL	
4. Transfer is authorized and hearing	ng on the petition of	is set for
	Date	
Date	at m. at Time	tion ·
☐ 5. ☐ Review ☐ Rehearing	☐ Adjournment is authorized and hearing	is set for
at m. at		Date .
at m. at Time	Rehearing Adjournment is denied.	
Date		
	Judge/Referee	Bar no.